MANITOWOC HEALTH CARE CENTER-FDD

2021 S ALVERNO RD

MANITOWOC	54220	Phone:(920	0) 683-4100		Ownership:	County
Operated from	1/1 To 12/	31 Days of	Operation:	366	Highest Level License:	FDDs
Operate in Con	junction with	h Hospital?		No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and	Staffed (12/	31/04):	32	Title 18 (Medicare) Certified?	No
Total Licensed	Bed Capacity	y (12/31/04):		32	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on 12/	31/04:		31	Average Daily Census:	30

Services Provided to Non-Residents		Age, Gender, and Primary Dia	Length of Stay (12/31/04)					
Home Health Care	Primary Diagnosis	% Age Groups		~~~~~~ %	Less Than 1 Year	12.9		
Supp. Home Care-Personal Care	No					1 - 4 Years	25.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	96.8	Under 65	83.9	More Than 4 Years	61.3	
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	12.9			
Respite Care	Yes	Mental Illness (Other)	Mental Illness (Other) 0.0 75 - 84 3.2			100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*********		
Adult Day Health Care	Para-, Quadra-, Hemiplegic	3.2	95 & Over	0.0	Full-Time Equivalent			
Congregate Meals No		Cancer	0.0			Nursing Staff per 100 Resider		
Home Delivered Meals No		Fractures	0.0	İ	100.0	(12/31/04)		
Other Meals	No	Cardiovascular	0.0	65 & Over	16.1			
Transportation	No	Cerebrovascular	0.0			RNs	3.8	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs	9.5	
Other Services No		Respiratory	0.0			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male 61.3		Aides, & Orderlies	45.4	
Mentally Ill	Yes			Female	38.7	İ		
Provide Day Programming for			100.0			İ		
Developmentally Disabled	Yes			İ	100.0	İ		

Method of Reimbursement

	Medicare Medicaid (Title 18) (Title 19) Other						amily Care	y Manage Care		_	l									
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				29	100.0	187	2	100.0	180	0	0.0	0	0	0.0	0	0	0.0	0	31	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		29	100.0		2	100.0		0	0.0		0	0.0		0	0.0		31	100.0

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Admissions, Discharges, and	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04									
Deaths During Reporting Period										
					Needing		Total			
Percent Admissions from:		Activities of	%	Ass	sistance of	-	Number of			
Private Home/No Home Health	56.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents			
Private Home/With Home Health	31.3	Bathing	9.7		38.7	51.6	31			
Other Nursing Homes	0.0	Dressing	29.0		48.4	22.6	31			
Acute Care Hospitals	6.3	Transferring	51.6		16.1	32.3	31			
Psych. HospMR/DD Facilities	0.0	Toilet Use	54.8		22.6	22.6	31			
Rehabilitation Hospitals	0.0	Eating	61.3		16.1	22.6	31			
Other Locations	6.3	*******	******	******	******	* * * * * * * * * * * * * * * * * * * *	******			
Total Number of Admissions	16	Continence		%	Special Treatm	ents	%			
Percent Discharges To:		Indwelling Or Extern	al Catheter	3.2	Receiving Re	spiratory Care	6.5			
Private Home/No Home Health	53.3	Occ/Freq. Incontinen	t of Bladder	48.4	Receiving Tr	acheostomy Care	0.0			
Private Home/With Home Health	20.0	Occ/Freq. Incontinen	t of Bowel	35.5	Receiving Su	ctioning	6.5			
Other Nursing Homes	6.7				Receiving Os	tomy Care	3.2			
Acute Care Hospitals	6.7	Mobility			Receiving Tu	be Feeding	6.5			
Psych. HospMR/DD Facilities	6.7	Physically Restraine	d	25.8	Receiving Me	chanically Altered Diets	48.4			
Rehabilitation Hospitals	0.0									
Other Locations	6.7	Skin Care			Other Resident	Characteristics				
Deaths	0.0	With Pressure Sores		0.0	Have Advance	Directives	100.0			
Total Number of Discharges		With Rashes		12.9	Medications					
(Including Deaths)	15	j			Receiving Ps	ychoactive Drugs	61.3			
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Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This		FDD		All	
	Facility %	Fac %	cilities Ratio	Fac %	ilties Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	93.8	93.1	1.01	88.8	1.06	
Current Residents from In-County	90.3	35.3	2.56	77.4	1.17	
Admissions from In-County, Still Residing	25.0	11.4	2.20	19.4	1.29	
Admissions/Average Daily Census	53.3	20.4	2.62	146.5	0.36	
Discharges/Average Daily Census	50.0	28.3	1.76	148.0	0.34	
Discharges To Private Residence/Average Daily Census	36.7	12.1	3.03	66.9	0.55	
Residents Receiving Skilled Care	0.0	0.0	0.00	89.9	0.00	
Residents Aged 65 and Older	16.1	16.0	1.01	87.9	0.18	
Title 19 (Medicaid) Funded Residents	93.5	99.1	0.94	66.1	1.42	
Private Pay Funded Residents	0.0	0.5	0.00	20.6	0.00	
Developmentally Disabled Residents	96.8	99.2	0.98	6.0	16.03	
Mentally Ill Residents	0.0	0.4	0.00	33.6	0.00	
General Medical Service Residents	0.0	0.4	0.00	21.1	0.00	
Impaired ADL (Mean)*	45.8	55.0	0.83	49.4	0.93	
Psychological Problems	61.3	48.1	1.27	57.7	1.06	
Nursing Care Required (Mean)*	10.5	10.7	0.98	7.4	1.41	